

## REQUEST

For receiving e use only	_
International Application No.	
International Filing Date	
Name of receiving Office and "PCT International Application"	_

The undersigned requests that the present international application be processed according to the Patent Cooperation Treaty.	Name of receiving Office and "PCT International Application"				
•	Applicant's or agent's (if desired) (12 characte	file reference ers maximum) HF-313-PCT			
Box No. 1 TITLE OF INVENTION					
ABNORMALITY DETECTION SYSTEM OF MO	BILE ROBOT		)		
Box No. II APPLICANT This person	n is also inventor				
Name and address: (Family name followed by given name; for a legal ent. The address must include postal code and name of country. The country of the Box is the applicant's State (that is, country) of residence if no State of residence.	he address indicated in this	Telephone No. 03-5412-11	14		
HONDA GIKEN KOGYO KABUSHIKI KAISI	- <b>A</b> A	Facsimile No.			
1-1, Minami-Aoyama 2-chome, Minato-ku, T		03-5412-1524			
JAPAN		Teleprinter No.			
		Applicant's regist	ration No. with the Office		
State (that is, country) of nationality:  JAPAN	State (that is, country)  JAPAN	of residence:	`		
		the United States of America only	the States indicated in the Supplemental Box		
Box No. III FURTHER APPLICANT(S) AND/OR (FURT	HER) INVENTOR(S)	<u></u>			
Name and address: (Family name followed by given name; for a legal entity, full official designation.  The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)  OGAWA Naohide  This person is:  applicant only  applicant and inventor					
c/o KABUSHIKI KAISHA HONDA GIJYUTS	U	inventor only (If this check-box is marked, do not fill in below.)			
KENKYUSYO, 4-1, Chuo 1-chome, Wako-s 351-0193 JAPAN	hi, Saitama	Applicant's registration No. with the Office			
State (that is, country) of nationality:  JAPAN	State (that is, country)  JAPAN	of residence:			
This person is applicant for the purposes of:  all designated the United States all designated the United States		the United States of America only	the States indicated in the Supplemental Box		
Further applicants and/or (further) inventors are indicated of	on a continuation sheet.				
Box No. IV AGENT OR COMMON REPRESENTATIVE	; OR ADDRESS FOR	CORRESPONDI	ENCE		
The person identified below is hereby/has been appointed to act of the applicant(s) before the competent International Authorities		agent	common representative		
Name and address: (Family name followed by given name; for a legal entity, full official designation.  The address must include postal code and name of country.)  Telephone No.  03-5956-7220					
8197 YOSHIDA Yutaka	Facsimile No.				
816, Ikebukuro White House Building, 20-2,	03-5956-7222				
Higashi Ikebukuro 1-chome, Toshima-ku,	Teleprinter No.				
Tokyo 170-0013 JAPAN	Agent's registration No. with the Office				
Address for correspondence: Mark this check-box where space above is used instead to indicate a special address to	no agent or common rep which correspondence s	resentative is/has b hould be sent.	een appointed and the		

Form PCT/RO/101 (first sheet) (March 2001; reprint January 2003)

See Notes to the request form

Sheet No.	o <b>2</b>	
Continuation of Box No. III FU. TER APPLICANT(S) A	AND/OR (FURTHER)	INVENTOR(S)
If none of the following sub-boxes is used, this sheet should no	t be included in the re	quest.
Name and address: (Family name followed by given name; for a legal entity the address must include postal code and name of country. The country of the Box is the applicant's State (that is, country) of residence if no State of residence.	This person is:  applicant only	
KAWAGUCHI Yuichiro		applicant and inventor
c/o KABUSHIKI KAISHA HONDA GIJYUTSL KENKYUSYO, 4-1, Chuo 1-chome, Wako-sh		inventor only (If this check-box is marked, do not fill in below.)
351-0193 JAPAN		Applicant's registration No. with the Office
State (that is, country) of nationality:  JAPAN	State (that is, country, JAPAN	) of residence:
This person is applicant all designated for the purposes of:	States except ates of America	the United States of America only the States indicated in the Supplemental Box
Name and address: (Family name followed by given name; for a legal entit The address must include postal code and name of country. The country of th Box is the applicant's State (that is, country) of residence if no State of residence	e address indicated in this	This person is:  applicant only applicant and inventor
c/o KABUSHIKI KAISHA HONDA GIJYUTSL KENKYUSYO, 4-1, Chuo 1-chome, Wako-sh 351-0193 JAPAN	-	inventor only (If this check-box is marked, do not fill in below.)  Applicant's registration No. with the Office
State (that is, country) of nationality:  JAPAN	State (that is, country, JAPAN	) of residence:
This person is applicant for the purposes of:  all designated the United States  all designated the United States		the United States of America only the States indicated in the Supplemental Box
Name and address: (Family name followed by given name; for a legal entity The address must include postal code and name of country. The country of the Box is the applicant's State (that is, country) of residence if no State of residence MATSUMOTO Takashi  c/o KABUSHIKI KAISHA HONDA GIJYUTSU	e address indicated in this e is indicated below.)	This person is:  applicant only  applicant and inventor inventor only (If this check-box
KENKYUSYO, 4-1, Chuo 1-chome, Wako-sh 351-0193 JAPAN	_	Applicant's registration No. with the Office
State (that is, country) of nationality:  JAPAN	State (that is, country) JAPAN	of residence:
		the United States of America only the States indicated in the Supplemental Box
Name and address: (Family name followed by given name; for a legal entity. The address must include postal code and name of country. The country of the Box is the applicant's State (that is, country) of residence if no State of residence.	e address indicated in this	This person is:  applicant only  applicant and inventor  inventor only (If this check-box is marked, do not fill in below.)  Applicant's registration No. with the Office
State (that is, country) of nationality:	State (that is, country)	of residence:
This person is applicant all designated for the purposes of:		the United States the States indicated in the Supplemental Box

Form PCT/RO/101 (continuation sheet) (March 2001; reprint January 2003)

See Notes to the request form

Further applicants and/or (further) inventors are indicated on another continuation sheet.

Box No. V DESIGNATION OF

ÉES

The following designations are hereby made under Rule 4.9(a):

Mark the applicable check-boxes below; at least one must be marked.

Regional Patent

AP ARIPO Patent: GH Ghana, GM Gambia, KE Kenya, LS Lesotho, MW Malawi, MZ Mozambique, SD Sudan, SL Sierra Leone, SZ Swaziland, TZ United Republic of Tanzania, UG Uganda, ZM Zambia, ZW Zimbabwe, and any other

State which is a Contracting State of the Harare Protocol and of the PCT (if other kind of protection or treatment desired,

- specify on dotted line)

  EA Eurasian Patent: AM Armenia, AZ Azerbaijan, BY Belarus, KG Kyrgyzstan, KZ Kazakhstan, MD Republic of Moldova, RU Russian Federation, TJ Tajikistan, TM Turkmenistan, and any other State which is a Contracting State of the Eurasian Patent Convention and of the PCT
- EP European Patent: AT Austria, BE Belgium, BG Bulgaria, CH & LI Switzerland and Liechtenstein, CY Cyprus, CZ Czech Republic, DE Germany, DK Denmark, EE Estonia, ES Spain, FI Finland, FR France, GB United Kingdom, GR Greece, IE Ireland, IT Italy, LU Luxembourg, MC Monaco, NL Netherlands, PT Portugal, SE Sweden, SI Slovenia, SK Slovakia, TR Turkey, and any other State which is a Contracting State of the European Patent Convention and of the PCT

National Patent (if other kind of protection or treatment desired, specify on dotted line):						
AE United Arab Emirates	M Gambia	NZ New Zealand				
AG Antigua and Barbuda	HR Croatia	. 🔀 OM Oman				
AL Albania		. X PH Philippines				
AM Armenia	ID Indonesia	PL Poland				
AT Austria	IL Israel	PT Portugal				
AU Australia	IN India	. 🔀 RO Romania				
AZ Azerbaijan	IS Iceland	RU Russian Federation				
BA Bosnia and Herzegovina	□ JP Japan					
BB Barbados	KE Kenya	. X SC Seychelles				
<b>I</b> BG Bulgaria	KG Kyrgyzstan	. 🔀 SD Sudan				
BR Brazil	KP Democratic People's Republic	SE Sweden				
BY Belarus	of Korea	. X SG Singapore				
BZ Belize	KR Republic of Korea	. 🔀 SK Slovakia				
X CA Canada	🔀 KZ Kazakhstan	. X SL Sierra Leone				
CH & LI Switzerland and Liechtenstein	LC Saint Lucia	TJ Tajikistan				
CN China	LK Sri Lanka	TM Turkmenistan				
CO Colombia	LR Liberia	TN Tunisia				
CR Costa Rica		TR Turkey				
CU Cuba		TT Trinidad and Tobago				
CZ Czech Republic	LU Luxembourg					
DE Germany		TZ United Republic of Tanzania				
DK Denmark	MA Morocco 🗵	. 🛮 UA Ukraine				
M Dominica	MD Republic of Moldova	. 🔀 UG Uganda				
DZ Algeria		. 🔣 US United States of America				
EC Ecuador	MG Madagascar					
EE Estonia	MK The former Yugoslav Republic of	UZ Uzbekistan				
ES Spain	Macedonia	VC Saint Vincent and the Grenadines				
FI Finland		■ VN Viet Nam				
GB United Kingdom	MWMalawi	X YU Yugoslavia				
GD Grenada	MX Mexico	ZA South Africa				
GE Georgia	MZ Mozambique					
GH Ghana	NO Norway	<b>ZW</b> Zimbabwe				
Check-boxes below reserved for designating	tates which have become now, to the DCT	after issuance of this short.				
Check-boxes below reserved for designating in the control of						
<b>-</b>	┙····································					
<b>—</b>		<b>U</b>				

**Precautionary Designation Statement:** In addition to the designations made above, the applicant also makes under Rule 4.9(b) all other designations which would be permitted under the PCT except any designation(s) indicated in the Supplemental Box as being excluded from the scope of this statement. The applicant declares that those additional designations are subject to confirmation and that any designation which is not confirmed before the expiration of 15 months from the priority date is to be regarded as withdrawn by the applicant at the expiration of that time limit. (Confirmation (including fees) must reach the receiving Office within the 15-month time limit.)

	. 3	sheet NoT				
Box No. VI PRIORITY	CLAIM	_				
The priority of the following earlier application(s) is hereby claimed:						
Filing date	Number of earlier application		Where earlier application	is:		
of earlier application (day/month/year)	от еагнет аррисация	national application: country or Member of WTO	regional application:* regional Office	international application: receiving Office		
item (1)						
item (2)						
item (3)						
item (4)						
item (5)						
Further priority claims	are indicated in the Supplement	ental Box.	_ <del></del>			
The receiving Office is requeif the earlier application was above as:  all items item (	ested to prepare and transmit filed with the Office which for  (1) item (2)	to the International Burea the purposes of this interna- item (3) item	ational application is the r	earlier application(s) (only receiving Office) identified  other, see Supplemental Box		
* Where the earlier applicatic Industrial Property or one M	on is an ARIPO application, is ember of the World Trade Oi	ndicate at least one countr ganization for which that	y party to the Paris Conve earlier application was fi	ention for the Protection of led (Rule 4.10(b)(ii)):		
Box No. VII INTERNAT	IONAL SEARCHING AUT	ГНОКІТУ				
Choice of International Sea international search, indicate	arching Authority (ISA) (if the Authority chosen; the two	wo or more International . -letter code may be used):	Searching Authorities are	competent to carry out the		
Request to use results of ea		hat search (if an earlier s	earch has been carried oi	ut by or requested from the		
International Searching Author Date (day/month/year)			ntry (or regional Office)	, ,		
Box No. VIII DECLARAT	TIONS					
The following declarations a check-boxes below and indica	are contained in Boxes Nos. tte in the right column the num	VIII (i) to (v) (mark the control of each type of declar	applicable vation):	Number of declarations		
Box No. VIII (i)	Declaration as to the identit	ry of the inventor		:		
Box No. VIII (ii)	Box No. VIII (ii) Declaration as to the applicant's entitlement, as at the international filing date, to apply for and be granted a patent :					
Box No. VIII (iii)	Box No. VIII (iii) Declaration as to the applicant's entitlement, as at the international filing date, to claim the priority of the earlier application :					
Box No. VIII (iv)	Declaration of inventorship United States of America)	p (only for the purposes o	f the designation of the	:		
Box No. VIII (v)	Declaration as to non-preju	idicial disclosures or exce	eptions to lack of novelty	:		

Form PCT/RO/101 (third sheet) (July 2002; reprint January 2003)

See Notes to the request form

Sheet	No		5	

Box No. IX CHECK LIST; LA GE OF FILING						
This international application cor (a) in paper form, the following sheets:		item(s)	ternational application is accompanied by the following (mark the applicable check-boxes below and indicate in blumn the number of each item):	Number of items		
request (including declaration sheets)	. 5	1. <b>X</b>	fee calculation sheet original separate power of attorney	: 1		
description (excluding		3.	original general power of attorney			
sequence listings and/or tables related thereto)	20	4.	copy of general power of attorney; reference number,	•		
claims	. 4		if any:	:		
abstract	: 1	5.	statement explaining lack of signature	:		
drawings	: 11	6. 🗆	priority document(s) identified in Box No. VI as item(s):			
Sub-total number of sheets sequence listings	: <b>41</b> :	7. 🗖	translation of international application into (language):	:		
tables related thereto (for both, actual number of	:	8. 🗖				
sheets if filed in paper form, whether or not also filed in		9. 🗖	sequence listings in computer readable form	•		
computer readable form; see (c) below)		(i)	(indicate type and number of carriers)  copy submitted for the purposes of international search under			
Total number of sheets	: 41	(ii)				
(b) only in computer readal (Section 801(a)(i))	ble form		additional copies including, where applicable, the copy for the purposes of international search under Rule 13ter	:		
(i) ☐ sequence listings (ii) ☐ tables related thereto		(iii)	together with relevant statement as to the identity of the copy copies with the sequence listings mentioned in left column	or :		
(c) also in computer readate (Section 801(a)(ii))	ole form	10.	tables in computer readable form related to sequence listings (indicate type and number of carriers)			
(i) sequence listings		(i)	Section 802(b-quater) only (and not as part of the international	al		
(ii) ☐ tables related thereto  Type and number of carriers	s (diskatta	(::X	application)	:		
CD-ROM, CD-R or other) on contained the	which are	(11)	(only where check-box (b)(ii) or (c)(ii) is marked in left column) additional copies including, where applicable, the copy for the purposes of international search under Section 802(b-quater)	e :		
sequence listings:		(iii)	together with relevant statement as to the identity of the copy copies with the tables mentioned in left column	or		
☐ tables related thereto: (additional copies to be indicated)		11. 🗆	other (specify):			
items 9(ii) and/or 10(ii), in rig	tea unuer tht column)		outer (specify).	•		
Figure of the drawings which should accompany the abstract:	FIG.6		age of filing of the ional application: Japanese	·		
Box No. X SIGNATURE O	F APPLICANT	Γ, AGEN	T OR COMMON REPRESENTATIVE e capacity in which the person signs (if such capacity is not obvious from reading	the request)		
	, , , , , , , , , , , , , , , , , , ,	<u> </u>	- The state of the	, me requesty.		
YOSHIDA Yutaka (Seal)						
For receiving Office use only						
1. Date of actual receipt of the p			2. Drav	vings:		
international application:				ŭ		
3. Corrected date of actual receipt due to later but timely received papers or drawings completing the purported international application:						
4. Date of timely receipt of the required corrections under PCT Article 11(2):						
5. International Searching Authority (if two or more are competent): ISA /  6. Transmittal of search copy delayed until search fee is paid						
For International Bureau use only						
Date of receipt of the record cop by the International Bureau:	у .		Dateda disc only			

Form PCT/RO/101 (last sheet) (January 2003)

## FEE CALCULATION SHEET Annex to the Request

Annex to the Request		International Application No.		
Appl file r	licant's or agent's eference	F-313-PCT	Date stamp of the receiving Office	
App	licant			
НС	NDA GIKEN KOGYO K	ABUSHIKI KAISHA		
CAI	CULATION OF PRESCRIBED	FEES		
1. 1	TRANSMITTAL FEE		90000 T	
1	SEARCH FEE International search to be carried ou If two or more International Searching search, indicate the name of the Authorit	t by Authorities are competent to carry ou	ut the international	
	NTERNATIONAL FEE Basic Fee			
\	Where items (b) and/or (c) of Box N Where items (b) and (c) of Box No.	IX do not apply, enter Total nur		
		1200 =	13200 b2	
Ē	in excess of 30 b3 additional component (only if	sequence listings and/or tables re eadable form under Section 801(	elated a)(i),	
	400 x	fee per sheet	b3	
1	Add amounts entered at b1, b2 and b	•	67200 В	
	Designation Fees The international application contain	ns 5 designations.		
	5 x	11600 =	58000 ㅁ	i 
	number of designation fees payable (maximum 5)	amount of designation fee		
Α	add amounts entered at B and D and	enter total at I	125200 🔳	
(2 ir to	Applicants from certain States are nternational fee. Where the applicant to be entered at I is 25% of the sum o	entitled to a reduction of 75% is (or all applicants are) so entitled, f the amounts entered at B and D.,	6 of the the total )	
4. F	EE FOR PRIORITY DOCUMENT	(if applicable)	P	
	OTAL FEES PAYABLE		215200 TOTAL	·
A	dd amounts entered at T, S, I and F	, and enter total in the TOTAL b	ox TOTAL	
	The designation fees are not paid a	at this time.		
	DE OF PAYMENT			
	authorization to charge deposit account (see below)	postal money order	cash coupons	
<u>Ш</u>	cheque	bank draft	revenue stamps other (spec	ify):
	HORIZATION TO CHARGE (C mode of payment may not be availa		Receiving Office: RO/	
	Authorization to charge the total fe	es indicated above.	Deposit Account No.:	
	(This check-box may be marked only of the receiving Office so permit) Autor credit any overpayment in the to	horization to charge any deficient		
	Authorization to charge the fee for	priority document.	Signature:	·

Form PCT/RO/101 (Annex) (January 2003)

See Notes to the fee calculation sheet